PTO/SB/06 (12-04)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number 10/044368		
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL E	ΥΤΠΥ	OR	OTHER THAN SMALL ENTITY	
	FOR	NU	NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	KC FEE FR 1.16(a), (b), cr (c		N/A		N/A		N/A			N/A	
SEARCH FEE (37 CFR 1.15(r), (i) or (m))			N/A		N/A		N/A			N/A	
EXAMINATION FEE (37 CFR 1.16(a), (b), er (q))			N/A		N/A		N/A]	N/A	
TOTAL CLAIMS (37 CFR 1.16(i))			minus 20 =		•		x =		OR	х =	
IND	PENDENT CLAI CFR 1.18(n))	MS	minus 3	- ·	•		x =		J	x =	
APP FEE	LICATION SIZE	sheets is \$250 addition	specification and drawings exceed 100 a of paper, the application size fee due 0 (\$125 for small entity) for each anal 50 sheets or fraction thereof. See S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						·		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))							N/A			N/A	
"If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL	
	AFFE	(Column 1) CLAIMS REMAINING		(Column 2) HIGHEST NUMBER	(Column 3)	1	SMALL E	ADDI-	OR	OTHER SMALL RATE (\$)	ENTITY ADDI-
AMENDMENT A		AFTER AMENDMEN		PREVIOUSLY PAID FOR	EXTRA			TIONAL FEE (\$)		-	FEE (\$)
	Total (37 CFR 1.18(6)	69	Minus	" 47	22		× 25 =		OR	x 50 =	1100
	Independent (37 CFR 1.18(A))	4	Minus	4	* 0		x 100-		OR	x 200 -	
ME	Application Size Fee (37 CFR 1.16(s))								4		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						N/A		OR	N/A	
2-2706							TOTAL ADD'L FEE		OR	ADD'L FEE	1100
		(Column 1)	4	(Column 2)	(Column 3)	, ,			٦ .		T
AMENDMENT B	,	CLAIMS REMAINING AFTER AMENDMEN		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (97 CFR 1.16(i)	. 10	9 Minus	" (09	1 -		x 25 -		QR	x 50 =	
	Independent (37 CFR 1 16(H)		Minus		1-/		x 100=		OR	x 200 .	200
	Application Size Fee (37 CFR 1.16(s))								-		
ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM V(37 CFR 1 16(j))						N/A		OR	N/A	
Please charge any additional fees or credit overpayment to Deposit Account No. 50-0413. • If the entry in column 1 is less than the entry in column 2, write "0" in column 3							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	200
	• If the entry in c	olumn 1 is less Number Previo	than the entr	' IN THIS SPACE	is less than 20	, ent	er *20".				

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3. enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

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